



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/528,014
Filing Date	March 17, 2000
First Named Inventor	Barany et al.
Group Art Unit	1634
Examiner Name	B.J. Forman
Total Number of Pages in This Submission	208
Attorney Docket Number	19603/481 (CRF D-2472A)

ENCLOSURES (check all that apply)

- ☒ Fee Transmittal Form
- ☒ Fee Attached
- ☒ Response to Office Communication
 - ☐ After Final
 - ☐ Affidavits/declaration(s)
- ☒ Extension of Time Request (\$120)
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Notice to File Missing Parts/Incomplete Application
 - ☐ A copy of the Notice to File Missing Parts under 37 CFR 1.52 or 1.53

- ☐ Assignment Papers (for an Application)
- ☒ Replacement Drawings (19 sheets)
- ☐ Declaration and Power of Attorney
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a Provisional Application
- ☐ Power of Attorney, Revocation Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) _____

- ☐ After Allowance Communication to Group
- ☐ Appeal Communication to Board of Appeals and Interferences
- ☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☐ Application Data Sheet
- ☐ Request for Corrected Filing Receipt with Enclosures
- ☒ A self-addressed, prepaid postcard for acknowledging receipt
- ☒ Other Enclosure(s) (please identify below):
 - Clean Version of Substitute Specification, Excluding Claims
 - Marked Up Version of Substitute Specification, Excluding Claims
 - Statement in Accordance with 37 C.F.R. § 1.821 (1 page)
 - Substitute Sequence Listing (11 pages)
 - 3.5" Computer Readable Diskette Containing Sequence Listing
- ☒ Check in the amount of \$120.00

Remarks

- ☒ The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-1138 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm
or
Individual name

Michael L. Goldman, Esq.
Nixon Peabody LLP
Clinton Square, P.O. Box 31051
Rochester, New York 14603-1051
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Signature

Michael L. Goldman

Registration No. 30,727

Date

January 21, 2005

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

I hereby certify that this correspondence is being:

- ☒ deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

- ☐ transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____

January 21, 2005
Date

Jo Ann Whalen
Signature
Jo Ann Whalen
Typed or printed name

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <div style="border: 2px solid black; border-radius: 50%; padding: 10px; display: inline-block; text-align: center;"> OFFICE OF FEE TRANSMITTAL FOR FY 2005 JAN 25 2005 </div>		Complete if Known	
Applicant claims small entity status. See 37 CFR 1.27 TO: AMENDMENT OF PAYMENT (\$120.00)		Application Number	09/528,014
		Filing Date	March 17, 2000
		First Named Inventor	Francis Barany
		Examiner Name	B.J. Forman
		Art Unit	1634
		Attorney Docket No.	19603/481 (CRF D-2472A)

METHOD OF PAYMENT (check all that apply)
☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☐ Deposit Account Deposit Account Number: 14-1138 Deposit Account Name: Nixon Peabody LLP
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple document claims	360	180

Total Claims
17 - 22 = 0 x \$50 = 0

Fee Paid (\$)
0

Multiple Dependent Claims
Fee (\$) **Fee Paid (\$)**
 _____ _____

HP -- highest number of total claims paid for, if greater than 20

Indep. Claims
1 - 3 = 0 x \$200 = 0

Fee Paid (\$)
0

HP -- highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	_____ / 50 = _____	_____ (round up to a whole number)	x _____ = _____	_____

4. OTHER FEE(S)

Non-English Specification,	\$130 fee (no small entity discount)	_____
Other: <u>Fee for One-Month Extension of Time (\$120)</u>		<u>\$120.00</u>

SUBMITTED BY

Signature		Registration No. 30,727 (Attorney/Agent)	Telephone (585) 263-1304
Name (Print/Type)	Michael L. Goldman	Date <u>January 21, 2005</u>	

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 I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on January 21, 2005
 Signature:
 Name: Jo Ann Whalen